

COUNCIL

Business Planning 2015/16

Meeting: 11 February 2015

Status: for decision

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(Head of Governance)

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Purpose

1. To seek Council's **approval** of the 2015/16 business plan, taking into consideration the work undertaken or planned in order to achieve our strategic objectives by the end of the three year strategic plan.
2. Council are asked to:
 - 2.1 **consider and approve** the outcomes which need to be achieved in order to achieve the seven strategic objectives (paragraph eight);
 - 2.2 **review** the work undertaken or planned in order to achieve our strategic objectives and desired outcomes (annex one); and
 - 2.3 **consider and approve** the 2015/16 business plan (annex two); and
 - 2.4 **delegate authority** to the Chief Executive and Registrar to finalise the plan for publication once consideration of resource business cases has been undertaken in March 2015 and the internal audit plan for 2015/16 finalised.

Strategic Objective

3. Developing and embedding an improved system of business planning and project management to support the development of our business plans and management of projects is included in the 2014/15 business plan. The work programme falls into the strategic aim of organisational change – building a sustainable and modern organisation. The Head of Governance is responsible for this work programme.

Background

4. The business planning process includes three stages of planning and consideration by SMT. In advance of proposing a business plan to Council in November 2014, SMT considered progress against the current year's business plan, the work required to complete current business plan projects which will continue into the following year and brief business cases for any new proposed projects to enable an assessment to be made as to which would be the most appropriate to include in order to achieve our strategic objectives, given available resources. Following consideration of the draft business plan by

Council, SMT have considered scope statements for the majority of planned projects (current and new). These statements have enabled SMT to assess the resources required to deliver each project and the business plan overall. Once the business plan has been approved by Council and new projects are to be initiated SMT will consider full project plans for all new projects in order to examine how the project will be managed.

5. Council reviewed the draft 2015/16 business plan in November 2014 and requested that the following be undertaken in finalising the plan:
 - 5.1 the Executive consider the risks associated with relocating and any impact that this might have on the ability to deliver the business plan, especially in the quarter in which the move was being undertaken;
 - 5.2 the Executive consider the various total quality management models available (such as ISO 9001, EFQM and SixSigma) to enable the GOC to gain assurance of the quality of its processes as part of the scope of a project on the development of an overarching framework for quality assurance;
 - 5.3 outcome 2.4 set out more clearly the GOC's approach to public engagement; and
 - 5.4 the diagram on page four be updated to reflect the restructure which would come into effect from 1 January 2015.

Analysis

2014/15 Business plan progress

6. The GOC approved a three year strategic plan and a business plan for 2014/15 in February 2014¹.
7. Many of the planned work programmes and projects in the 2014/15 business plan have progressed during the year and contributed to the achievement of our strategic objectives. This progress is reported to Council as part of our ongoing quarterly performance reporting (see paper C05(15)). Some areas of work and projects have been delayed or have taken longer than expected due to a number of reasons, some external to the GOC.
8. SMT have identified the following projects being undertaken in 2014/15 which will need to be continued into 2015/16 or 2016/17 in order to ensure completion:
 - 8.1 standards review;
 - 8.2 business regulation;
 - 8.3 student regulation;
 - 8.4 illegal practice strategy;
 - 8.5 CRM;

¹ https://www.optical.org/en/about_us/strategic_plan/index.cfm

- 8.6 people strategy; and
 - 8.7 property relocation.
9. SMT have identified the following work areas being undertaken in 2014/15 which will need to be continued into 2015/16 or 2016/17 in order to ensure completion:
- 9.1 review of accreditation process;
 - 9.2 Review of the processes for assessing registration applications from inside and outside Europe;
 - 9.3 stakeholder engagement strategy;
 - 9.4 corporate and member complaints processes, including whistleblowing and protected disclosure;
 - 9.5 governance framework;
 - 9.6 corporate social responsibility and sustainability; and
 - 9.7 performance and reward framework.

2014-17 Strategic plan progress

10. At the Corporate Performance Review day in June 2014 Council considered and provided feedback on the outcomes which needed to be achieved in order to achieve the seven strategic objectives as part of its consideration of the draft Performance Measurement Framework. The objectives and finalised outcomes are as follows:

10.1 **Higher standards** – to promote higher standards across the optical professions.

Outcomes:

- Our standards reflect good practice, address the risks to the public and are flexible enough to allow the delivery of optical care to evolve.
- Our standards are presented clearly to registrants and the public, and are supported by appropriate guidance.
- Our standards are effective for use in our FTP processes and in the education and training of registrants, including the CET scheme.
- Our system of accrediting and quality-assuring optical education, training and qualifications, ensures that registrants joining the register are fit to practise.
- Our CET system ensures the continued fitness to practise of registrants, while minimising administrative burdens.

10.2 **Increased trust and awareness** – to promote public trust in the professions, and enable the public to make informed decisions about optical care and raise any concerns.

Outcomes:

- Our public register remains accurate and accessible.

- We reduce the potential harm to the public's health and safety posed by illegal practice.
- We enhance confidence in regulation.
- We are more accessible and responsive to the public.
- We promote a clear understanding of our role.

10.3 **Improved complaints-handling** – to deal with complaints more quickly and effectively.

Outcomes:

- We handle FTP complaints quickly and effectively.
- We work effectively with others to share information about concerns.
- We handle illegal practice complaints quickly and effectively.
- We handle corporate complaints quickly and effectively.
- We deal with consumer concerns quickly and effectively.

10.4 **Better service delivery** – to deliver high quality services to the public and the professions.

Outcomes:

- We are more open and responsive in our dealings with registrants and the public.
- Our registration process is accessible and user friendly.
- Our guidance, policy and processes for registrants and the public are accessible and clear.

10.5 **Regulatory change** – to implement a targeted and proportionate system of regulation.

Outcomes:

- We have a more targeted and proportionate system of regulation to enhance our ability to protect and promote public health and safety.

10.6 **Improved evidence base** – to ensure our work is informed by an understanding of the public's perspective and how optical care is changing.

Outcomes:

- Our work is informed by an understanding of the public's perspective and the perspective of registrants and our decisions are based on sound evidence.
- Our policy thinking and the development of strategy is informed by an understanding of how health regulation and optical care is changing.

10.7 **Organisational change** – to build a more sustainable and modern organisation.

Outcomes:

- Our finances are stable and well managed.

- Our employees and members have the support and training they need to carry out their roles effectively.
 - We are able to carry out our role effectively as a modern and sustainable regulator.
 - We have an engaged and positive work force.
 - Equality, diversity and inclusion (EDI) is embedded and promoted within our organisation.
11. An analysis has been undertaken of the work undertaken or planned in order to achieve these strategic objectives by the end of the three year strategic plan (annex one).

2015/16 Programme work and Projects

12. The SMT has considered the work currently undertaken or planned and discussed any additional work to be undertaken in order to achieve our strategic objectives by the end of the three year strategic plan. They agreed to include the following additional areas of work as projects in 2015/16:
- 12.1 development of a quality assurance framework;
 - 12.2 review of our accreditation process;
 - 12.3 Review of the processes for assessing registration applications from inside and outside Europe; and
 - 12.4 review of the CET scheme.
13. The SMT also agreed to include an additional project in 2016/17 to develop our approach to customer service. It was felt that work on this area should not be commenced until work on the property relocation project and work on the performance and reward framework had been completed.
14. In developing the business plan, the Executive have taken account of the risks identified in departmental risk registers. The Senior Management Team have reviewed the plan to ensure that appropriate risk mitigation actions from the corporate risk register have been included and have considered the risks associated with relocating and any impact that this might have on the ability to deliver the business plan, especially in the quarter in which the move is being undertaken.
15. An internal audit plan for 2015/16 will not be agreed until the April Audit and Risk Committee. Once finalised the internal audits will be included into the business plan. Possible internal audit work has been included in annex 1 in italics as has not been confirmed.
16. SMT have been considering how to resource work required in a number of areas which is not possible for it to be completed with current capacity, in order to ensure they are achieved within the current strategic plan. In their discussions the SMT were mindful of the requirement for organisational

development on a sustainable timetable. The SMT agreed to postpone the following areas of work until 2016/17:

- 16.1 Complaints - progression of the review of corporate and member complaints processes;
 - 16.2 Corporate policies and procedures – managing programme of review;
 - 16.3 Stakeholder agreements – managing programme of development and review of agreements with stakeholders;
 - 16.4 Business Planning – implementation of an organisational approach to planning;
 - 16.5 Project management – development and implementation of an organisational approach to project management; and
 - 16.6 Performance reporting – further development of the performance measurement system in relation to quality assurance measures.
17. The SMT agreed to consider in March 2015 a resource business case for one employee (Compliance Manager) on a fixed term basis of one year to undertake some of this work. At this time the projected surplus, and therefore the amount to be contributed to the special reserve will be more certain. Until the resource business case has been agreed the following areas have been removed from the business plan:
- 17.1 Equality diversity and inclusion – implementation of the strategy – embedding and progressing of actions, monitoring reports and reports on progress against action plan;
 - 17.2 Information Governance – finalisation and implementation of information governance policies and review of the publication scheme;
 - 17.3 Complaints - progression of the review of the whistleblowing policy and the development of guidance on making a protected disclosure;
 - 17.4 Corporate policies and procedures – developing a programme of review; and
 - 17.5 Stakeholder agreements – developing guidance and reviewing known agreements with stakeholders.
- If agreed this role may include ongoing work to respond to FOI and DPA requests and publish data and/or ongoing complaint handling.

Impacts

18. Identify any implications decisions may have on:
- 18.1 **GOC's reserves** – no implications arising – other than already identified as part of 2015/16 budget planning;
 - 18.2 **GOC budget** – a budget has been created at the same time as the business plan to ensure that resources are aligned with planned work;
 - 18.3 **Legislation** – no implications arising;
 - 18.4 **Resources** – project managers, HoDs and managers have been involved in development of the business plan. The work to produce the business plan has been undertaken with existing resource;

- 18.5 **Equality and Diversity** – no implications arising; and
18.6 **Human Rights Act** – no implications arising.

Devolved Nations

19. In creating the business plan consideration has been given to issues affecting the devolved nations. These will be addressed in the course of our work, particularly through the standards strategic review and the implementation of our stakeholder engagement strategy.

Communications

20. The business plan has been communicated internally and discussed at the management forum a number of times to ensure all employees are engaged fully. The business plan will be published once approved by Council in February 2015.

Risks

21. Failure to develop an achievable business plan incurs the following risks:
- 21.1 the GOC may suffer some reputational risk if it does not achieve what it sets out to achieve in its strategic plan therefore it is important to plan properly;
 - 21.2 the GOC may have a higher level of legal risk if it does not fulfil its legal responsibilities; and
 - 21.3 the GOC may suffer some financial risk if it does not consider development of its budget alongside business plans and as a result does not have enough resources to deliver its strategic objectives.

Recommendations

22. Council are asked to:
- 22.1 **consider and approve** the outcomes which need to be achieved in order to achieve the seven strategic objectives (paragraph ten);
 - 22.2 **review** the work undertaken or planned in order to achieve our strategic objectives and desired outcomes (annex one);
 - 22.3 **consider and approve** the 2015/16 business plan (annex two); and
 - 22.4 **delegate authority** to the Chief Executive and Registrar to finalise the plan for publication once consideration of resource business cases has been undertaken in March 2015 and the internal audit plan for 2015/16 finalised.

Timeline for future work

23. Once approved by Council in February 2015 the business plan will be finalised by the Chief Executive and Registrar, include the agreed budget and published in March 2015.

Attachments

- Annex 1 – Achievement of Strategic objective analysis
- Annex 2 – Draft 2014/15 Business Plan

Achievement of Strategic objectives analysis

Items in italics are not present in the 15/16 business plan as a decision on resource is subject to review by SMT in March or are provisional internal audit work for 2015/16 which will be agreed in April 2015.

1. Higher standards

Our strategic objective is to promote higher standards across the optical professions.

	Outcomes	Programme Work	Project Work
1.1	Our standards reflect good practice, address the risks to the public and are flexible enough to allow the delivery of optical care to evolve		Standards review to produce revised standards (14/15-15/16)
1.2	Our standards are presented clearly to registrants and the public, and are supported by appropriate guidance	Ongoing provision of guidance on Standards	Standards review to produce clear standards and supplementary material (14/15-15/16)
1.3	Our standards are effective for use in our FTP processes and in the education and training of registrants, including the CET scheme		Standards review to produce revised standards (14/15-15/16)
1.4	Our system of accrediting and quality-assuring optical education, training and qualifications, ensures that registrants joining the register are fit to practise	Quality assurance visits and reports	Standards review to produce revised standards for optical education, training and qualifications (14/15-15/16)
			Review of our accreditation process will enhance our governance of the accreditation system (14/15-15/16)
			Framework for the quality assurance of regulatory activity and decision making will enhance quality assurance of our accreditation system (15/16-16/17)

	Outcomes	Programme Work	Project Work
1.5	Our CET system ensures the continued fitness to practise of registrants, while minimising administrative burdens	Ongoing provision of advice relating to CET requirements and individual registrants CET status	Standards review to identify required changes to CET scheme (15/16)
		Ongoing approval and quality assurance of CET provision	
		Ongoing auditing of registrants CET portfolios and data analysis	Review of first three year CET cycle (15/16)
		2013-15 CET cycle Report (15/16)	
		Annual CET compliance reports	

2. Increased trust and awareness

Our strategic objective is to promote public trust in the professions and enable the public to make informed decisions about optical care and raise any concerns.

	Outcomes	Programme Work	Project Work
2.1	Our public register remains accurate and accessible	Ongoing public register maintenance	CRM will enable changes to the register to be made quickly (14/15)
		Ongoing assessment of UK and non-UK registration applications	
		Internal audit of data integrity of the registers (14/15) <i>and audit of CRM (15/16)</i>	Review of the register – development of lifetime registration number (15/16)
		Respond to requests for information from registrants, patients, employers and the public	
2.2	We reduce the potential harm to the public's health and safety posed by illegal practice	Ongoing illegal practice complaint management	Illegal practice strategy will develop code of practice and information for the public (14/15-15/16)
2.3	We enhance confidence in regulation	Ongoing external communications	Illegal practice strategy will develop code of practice and information for the public (14/15-15/16)
			Review of our accreditation process will increase stakeholder confidence (14/15-15/16)
		Internal audit Quality Assurance framework advice (14/15)	Review of the processes for assessing registration applications from inside and outside Europe (14/15-15/16)
			Development of a framework for the quality assurance of regulatory activity and decision making (15/16 and 16/17)

	Outcomes	Programme Work	Project Work
2.4	We are more accessible and responsive to the public	Publication of annual reports - PSA performance review, Annual report and FTP Annual Report	Customer service project (2016/17)
		Review of publication of committee minutes (16/17)	
		Website content revision and search engine optimisation (14/15)	<i>Corporate and member complaints review (16/17)</i>
		Ongoing work to respond to FOI and DPA requests and publish data	<i>Whistleblowing, protected disclosure (15/16) and acceptable behaviour (14/15) policies</i>
2.5	We promote a clear understanding of our role.	Implementation of stakeholder engagement strategy, including engagement with public and patient bodies, attendance at conferences, student roadshows and engagement with CET approvers and educational institutes	Standards review will clarify our role in promoting higher standards as part of emphasising our role in proactively promoting public health and safety (14/15-15/16)
		Policy for raising awareness of FTP outcomes (14/15)	
		Issuing press releases when registrants are erased or suspended	

3. Improved complaints-handling

Our strategic objective is to deal with complaints more quickly and effectively.

	Outcomes	Programme Work	Project Work
3.1	We handle fitness to complaints quickly and effectively	Ongoing FTP complaint handling working towards 12 month end to end timeframe	Implementation of revised FTP Rules (14/15)
		End to end case review (14/15)	
		Ongoing FTP learning point letters	
		Internal audit report of FTP case administration (14/15)	
		Review health assessments provider contract (15/16)	
		Legal services contract review (15/16)	
		Indemnity cover checks pilot (14/15-15/16)	
		Annual audits of FTP investigation process, initial stages and IC/CE	
		Ongoing effective Investigation committee meetings, management and quality assurance of case examiners workload.	
3.2	We work effectively with others to share information about concerns	<i>Stakeholder agreements</i> (14/15-16/17)	
		Stakeholder engagement strategy implementation	
		Issuing press releases when registrants are erased or suspended	
3.3	We handle illegal practice complaints quickly and effectively	Ongoing Illegal practice complaint handling	Illegal practice strategy implementation (14/15-16/17)
		End to end case review (14/15)	
3.4	We handle corporate complaints quickly and effectively	Ongoing complaint handling	Review of corporate complaints policy and processes (16/17)
3.5	We deal with consumer concerns quickly and effectively	Procurement (14/15) and ongoing management of OCCS	
		Working Together agreement (14/15)	
		OCCS annual report to Council	

4. Better service delivery

Our strategic objective is to deliver high quality services to the public and the professions.

	Outcomes	Programme Work	Project Work
4.1	We are more open and responsive in our dealings with registrants and the public	Revise and improve website content (14/15)	Customer service project (16/17)
		Public Council meetings and publication of Council papers and minutes	
		Review whether to publish committee meeting minutes (16/17)	Corporate and member complaints review (16/17)
		Annual member declaration and publication of the register of interests	CRM will enable registrant and stakeholder engagement processes to be streamlined (14/15-15/16)
		Publication of a register of Gifts and Hospitality (15/16)	
		Publication of Council member and SMT remuneration and expenses (14/15)	
4.2	Our registration process is accessible and user friendly	'MyGOC' to be made more accessible for tablets and smart phones (15/16)	Customer service project (16/17)
			CRM will enable the registration processes to be streamlined (14/15)
		Student and fully qualified registrant retention cycles	Review of the register (15/16-16/17) – development of lifetime registration number (15/16)
4.3	Our guidance, policy and processes for registrants and the public are accessible and clear	Review of FTP guidance (14/15)	Standards review to produce clear standards and guidance (14/15-15/16)
		FTP Publication and disclosure policy (14/15)	Review of our accreditation process will produce clearer accreditation handbooks (14/15 - 15/16)
		Hearings listings policy (15/16)	Process for review of corporate policies and procedures (16/17)

5. Regulatory change

Our strategic objective is to implement a targeted and proportionate system of regulation.

	Outcomes	Programme Work	Project Work
5.1	We have a more targeted and proportionate system of regulation to enhance our ability to protect and promote public health and safety	Ongoing engagement with Department of Health, other regulators and the Professional Standards Authority regarding Law Commissions' draft Bill	Standards review to produce revised standards which reflect good practice, address risks to the public and are flexible to allow the delivery of optical care to evolve (14/15-15/16)
		Update on impact of legislative change on student and business regulation (15/16)	Review of student regulation in order to deliver a more targeted and proportionate system of regulation (14/15)
		Recognition of Professional Qualifications Directive – undertake work to ensure that the GOC satisfies the requirements of the RPQ Directive in a way that is proportionate	Review of business regulation in order to deliver a more effective system of regulation (14/15)
		Ongoing implementation of European directive on recognition of professional qualifications	<p>Illegal practice strategy will develop code of practice and information for the public (14/15-15/16)</p> <p>Review of the processes for assessing registration applications from inside and outside Europe to ensure appropriate quality assurance (14/15-15/16)</p>

6. Improved evidence base

Our strategic objective is to ensure our work is informed by an understanding of the public's perspective and how optical care is changing.

	Outcomes	Programme Work	Project Work
6.1	Our work is informed by an understanding of the public's perspective and the perspective of registrants and our decisions are based on sound evidence	Research strategy (14/15)	Standards review – will be informed by research with the public and registrants (15/16)
		Public perceptions survey (14/15 & 15/16)	
		Registrants' survey (15/16)	
6.2	Our policy thinking and the development of strategy is informed by an understanding of how health regulation and optical care is changing	Horizon scanning including annual optical sector report to inform Council strategy day and business plan	
		Implementation of stakeholder engagement strategy	
		Ongoing digital communications updates	
		Corporate performance management system (14/15)	

7. Organisational change

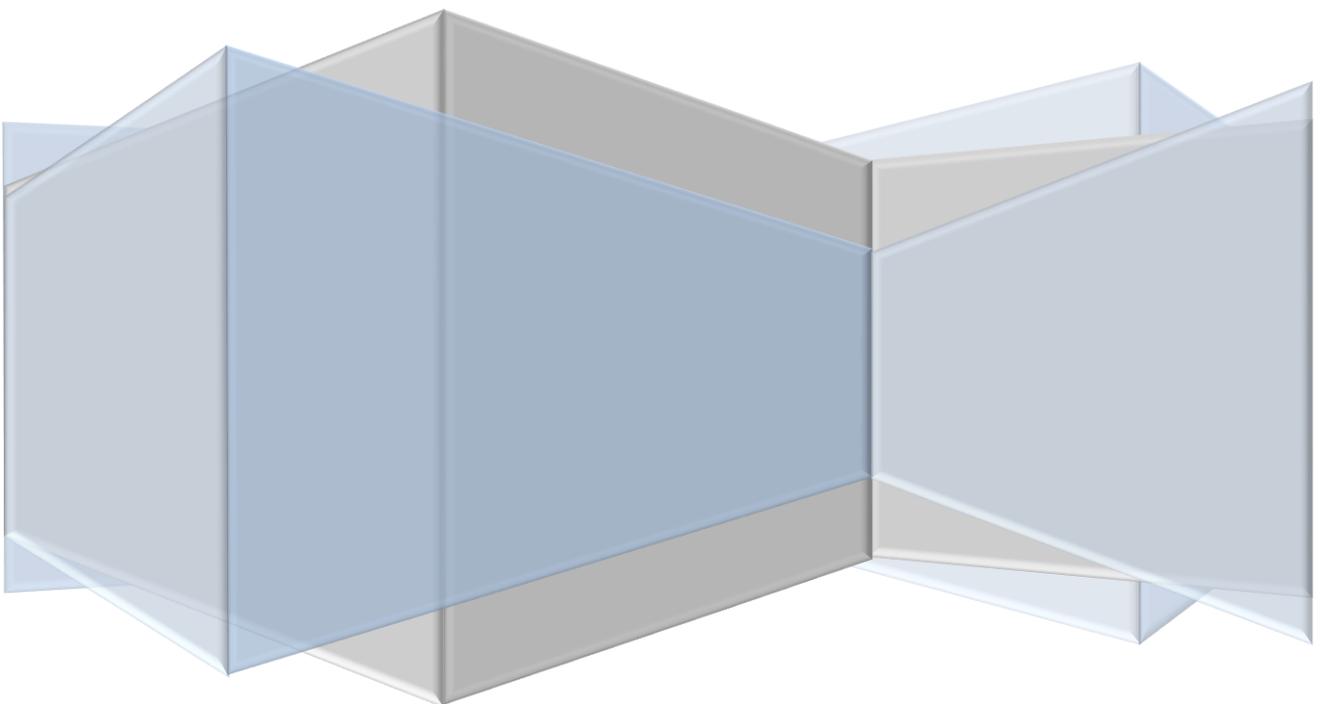
Our strategic objective is to build a more sustainable and modern organisation.

	Outcomes	Programme Work	Project Work
7.1	Our finances are stable and well managed	Ongoing financial management and reporting	CRM system will make our management of case costs more visible and controllable (14/15-15/16)
		Ongoing month-end reporting, payments & payroll	
		Ongoing monthly management accounts and Quarterly forecasting	
		Enhanced financial reporting, budgeting, modeling and forecasting	
		Internal audit of procurement and contracts management (14/15)	
		Long-term financial planning (15/16)	
		Streamlining payroll systems (15/16)	
		Enhanced Sage related reporting (15/16)	
		<i>Internal audit of Core business functions (15/16)</i>	
		Annual business planning	
		Enhanced business planning (14/15) and organisational approach to planning (16/17)	
7.2	Our employees and members have the support and training they need to carry out their roles effectively	Ongoing provision of internal legal advice	People strategy – including engagement, training and development, and succession planning of staff and members (14/16-15/16)
		Ongoing IT user support	
		Ongoing building and utilities maintenance	
		Ongoing effective executive management and team meetings	
		Ongoing effective Council and committee meetings	
		Ongoing meetings management	
		Review of key HR policies (15/16)	
		Employee and member appraisals	
		Council evaluation	
		Ongoing employee and member support	CRM system to make our work more effective and provide new email system (15/16)
		Employee and member induction and training	
		Employee survey (15/16 & 16/17)	
		Development of the intranet (15/16 & 16/17)	
		Appointments policy review – additional roles (16/17)	
		Review Disaster Recovery supplier (15/16)	
Annual Business Continuity update			

	Outcomes	Programme Work	Project Work
7.3	We are able to carry out our role effectively as a modern and sustainable regulator	Council and committee forward planning	CRM system will make our work processes more streamlined and effective, improve reporting and improve employee productivity (14/15-15/16)
		Ongoing risk management analysis	
		Effective system of executive management and team meetings	
		Effective Council and committee meetings	
		Web based recruitment process (14/15)	Property relocation will allow flexibility in resourcing and provide meeting space (14/15-15/16)
		Enhanced corporate performance reporting system (14/15 - 16/17)	
		<i>Internal audit review of KPIs and management information (15/16)</i>	
		Enhanced approach to corporate social responsibility and sustainability (14/15-16/17)	
		New systems for document management and expenses (15/16)	Improved governance framework – scheme of delegation (14/15 & 16/17), standing orders (16/17), terms of reference (14/15-16/17) and governance policies: Bribery (14/15), Gifts & Hospitality (14/15-15/16) and Code of Conduct & Conflicts (15/16)
		<i>Internal audit review of risk management systems (15/16)</i>	
		IT strategy and IT audit (15/16)	
		<i>Internal audit of ICT infrastructure and security (15/16)</i>	<i>Development of process for review of corporate policies and procedures (15/16-16/17)</i>
		Internal audit of project management processes (15/16)	
		Organisational approach to project management (16/17)	

	Outcomes	Programme Work	Project Work
7.4	We have an engaged and positive work force	Ongoing internal communications	Property relocation will increase staff morale (14/15-15/16)
		Employee recruitment and member appointment/reappointment	
		Spot check internal audit of HR recruitment processes and employee files (14/15)	People strategy - including engagement, training and development, and succession planning of staff and members (14/16-15/16)
		Employee survey (15/16 & 16/17)	
		Performance and reward framework (14/15 & 15/16)	
7.5	Equality, diversity and inclusion (EDI) is embedded and promoted within our organisation	EDI strategy (14/15)	CRM system will provide enhanced registrant diversity data (15/16)
		<i>Ongoing EDI work to embed EDI, progress actions, Report progress against action plan and publish an annual monitoring report</i>	

**29 January 2015 – for
consideration by Council on
11 February 2015**



1. Introduction

We are the regulator for the optical professions in the UK. We currently register around 26,000 optometrists, dispensing opticians, student opticians and optical businesses. Our role is to protect and promote the public's health and safety. Further information on our approach to regulation, the environment in which we work and our strategic objectives is provided in our strategic plan² for the period April 2014 to March 2017, which is published on our website.

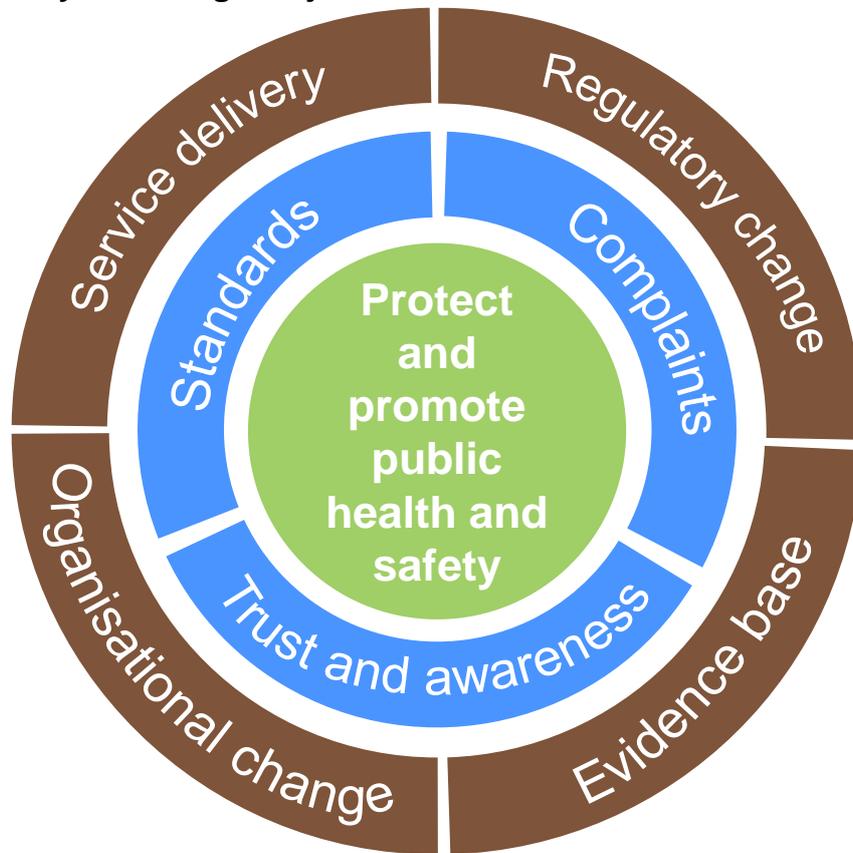
Our strategic objectives are:

1. **Higher standards** – promoting higher standards across the optical professions.
2. **Increased trust and awareness** – promoting public trust in the professions, and enabling the public to make informed decisions about optical care and raise any concerns.
3. **Improved complaints-handling** – dealing with complaints more quickly and effectively.
4. **Better service delivery** – delivering high quality services to the public and the professions.
5. **Regulatory change** – implementing a targeted and proportionate system of regulation.
6. **Improved evidence base** – ensuring our work is informed by an understanding of the public's perspective and how optical care is changing.
7. **Organisational change** – building a sustainable and modern organisation.

² https://www.optical.org/en/about_us/strategic_plan/index.cfm

These seven objectives are summarised in the Figure below, which emphasises that delivering public benefit is central to our role.

Figure 1: Summary of strategic objectives

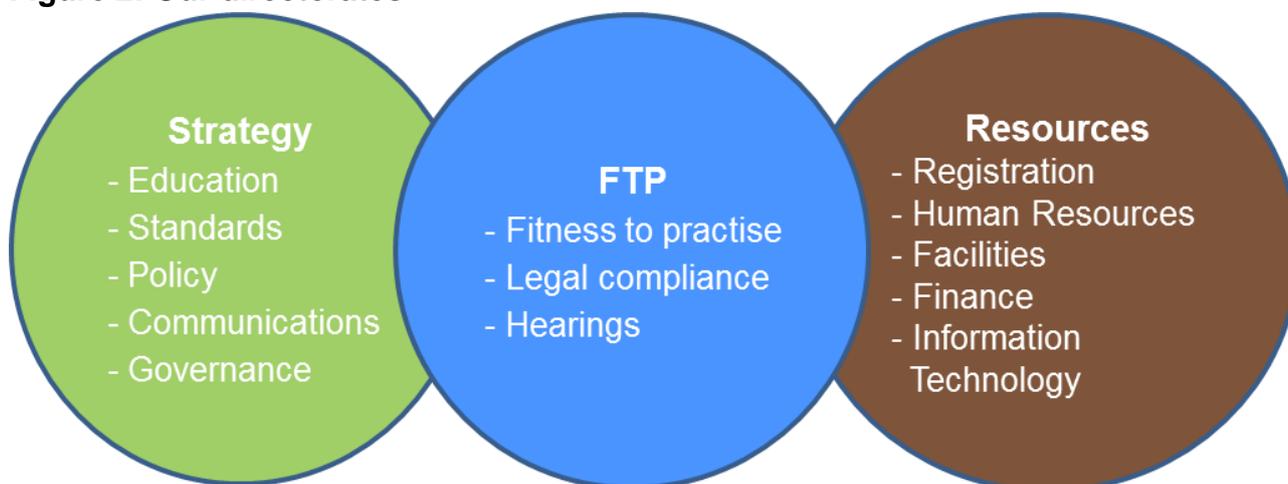


We set out in section two our business plan for 2015/16 which identifies how we will work towards our strategic objectives during the first year covered by our strategic plan.

2. Delivery of programme and projects

The GOC is structured into three directorates set out below.

Figure 2: Our directorates



This section sets out the programmes of work and projects that will be delivered during 2015-2016. We have included our planned timescales for the outputs and activities of each of the programmes of work and projects.

Some areas of work and all projects involve cross-organisational activity, where this is the case, we have located the work programme or project in the directorate which is leading the area of work.

2015/16 key projects

Our projects have our Senior Management team as their project board and progress is regularly reviewed at project board meetings.

	Project	Strategic objective
1.	Standards strategic review	1, 2, 5 & 6
2.	Property relocation	7
3.	Customer relationship management (CRM) system – phase two	4 & 7
4.	Review of accreditation processes	1
5.	Review of continuing education and training (CET) scheme	1
6.	Illegal practice strategy implementation	2, 3 & 5
7.	Review of the processes for handling applicants for registration from inside and outside Europe	5
8.	People strategy	7
9.	Quality Assurance Framework	1, 2 & 7
10.	Review of business regulation implementation*	5
11.	Review of student regulation*	5

* Our projects on student and business regulation are currently on hold until the impact of legislative change is clear.

Strategy Directorate

The Director of Strategy is Alistair Bridge. The directorate has responsibility for six functions: education and standards, policy and research, communications, compliance, planning and performance and governance. The Directorate is also responsible for organisational strategy development. The work programmes and projects to be undertaken during 2015/16 are:

Strategy - Work programmes	Strategic objectives	Key activities and outputs			
Education and Standards		Q1	Q2	Q3	Q4
Standards – Provision of advice to registrants and members of the public on our standards.	1.2				New standards supplementary material
Ongoing provision of guidance on Standards					
Accreditation and quality assurance – Managing the accreditation and quality-assurance of optical education, training and qualifications.	1.4	3 visits		1 visit	1 visit
Reports showing the findings of our accreditation and quality assurance visits.					
CET - Managing the Continuing Education and Training Scheme, including the provision of advice, approval and quality assurance of provision and auditing.	1.5				2013-15 CET cycle Report
Launch of 2016-18 CET scheme					
Ongoing provision of advice relating to CET requirements and individual registrants CET status					
Ongoing approval and quality assurance of CET provision					
Ongoing auditing of registrants CET portfolios and data analysis					

Strategy - Work programmes	Strategic objectives	Key activities and outputs			
Policy		Q1	Q2	Q3	Q4
Horizon scanning – Identifying and reporting on developments in health regulation and optical care, including developments in the devolved nations.	6.2			Optical sector report to inform Council strategy day and 2016/17 business plan	
		Ongoing monitoring of developments			
Legislative change – Managing engagement with the development of the new legislative framework that is expected to flow from the UK Law Commissions’ review.	5.1		Update to Council on impact of legislative change on student and business regulation		
		Ongoing engagement with Department of Health, other regulators and the Professional Standards Authority regarding Law Commissions’ draft Bill			
		Implementation of revised Recognition of Professional Qualifications Directive			
Research		Q1	Q2	Q3	Q4
Research – Implementing our research framework by carrying out research with registrants, employees and the public.	6.1, 7.2 & 7.4	Carry out employee survey		Carry out public perceptions research	Carry out registrant survey
		Carry out research for standards review			

Strategy - Work programmes	Strategic objectives	Key activities and outputs			
Communications		Q1	Q2	Q3	Q4
Effective communication - Managing internal and external communications, including media relations.	2.3, 2.5, 3.2 & 7.4	Ongoing internal and external communications			
		Issuing press releases when registrants are erased or suspended			
		Promote standards review consultation to encourage responses	Communicate building move to press, registrants and stakeholders	Communicate end of the 2014-2016 CET scheme	Promote standards review consultation on business standards
Stakeholder engagement - Implementing our stakeholder engagement strategy.	2.5, 3.2 & 6.2	Implement stakeholder engagement strategy			
		Engage with stakeholders on standards review			
		Implement mechanism with CRM to track stakeholder engagement activity			Review of stakeholder engagement strategy
Communication channels – Improving our website and digital communications.	6.2	Ongoing digital communications updates			
		Implement new mass-email system within CRM		Implementation of 'MyGOC' for tablets and smart phones	
PSA Performance review - Managing our input to the PSA performance review to account for our performance.	2.4		Council discussion of PSA performance report for 14/15	Draft PSA submission for 2015/16	PSA follow up questions and meeting

Strategy - Work programmes	Strategic objectives	Key activities and outputs			
Performance and Planning		Q1	Q2	Q3	Q4
Business planning – Development of our business plans to ensure achievement of our strategic objectives.	7.2			Draft business plan	Final business plan
Performance reporting - Reporting on organisational performance.	2.4, 6.2 & 7.2	Council's annual performance review			
		Quarterly performance reports	Quarterly performance reports	Quarterly performance reports	Quarterly performance reports
		PSA data sets		PSA data sets	
Governance		Q1	Q2	Q3	Q4
Decision making - Managing Council and committee meetings	4.1 & 7.2	Council & committee forward plans Annual meeting calendar			
		2 x Council	1 x Council	2 x Council	1 x Council
		4 x ctees	5 x ctees	7 x ctees	4 x ctees
Governance Framework - Developing and embedding governance policies and processes.	7.3	Scheme of delegation initial review		Code of Conduct and Conflicts of Interest Policy	Register of interests
		Review Nominations Committee Terms of Reference (TOR)		Council and committee member annual declarations	
Annual Reporting - Managing the production of our annual reports.	2.4	Draft annual report		Publish annual report	Annual Return
		Draft FTP annual report		Publish FTP annual report	

Strategy - Work programmes	Strategic objective	Key activities and outputs			
Governance		Q1	Q2	Q3	Q4
Non-Executive support - Managing Council and committee member appointments, reappointments, appraisals and training and Council's evaluation of its performance.	7.2, 7.4	Council evaluation	Council and Committee Induction/training	Annual Ctee reappointments	
		Hearing panel appointments	Investigation Committee appointments	Council member appointment	Education/Registration Committee appointments
		Council appraisals	Edn Ctee appraisals	Standards, Companies and Registration appraisals	Hearing Panel appraisals
		Hearing Panel Chairs appraisals			

Strategy Projects	Strategic objectives	Key activities and outputs			
		Q1	Q2	Q3	Q4
Reviewing our approach to standards – We will develop a framework for ensuring that standards and accompanying guidance remain clear and up to date.	1.1, 1.2, 1.3, 1.4, 1.5, 2.5, 4.3, 5.1, 6.1	Consultation on regulatory implications of changing scopes of practice	Publication of new standards of practice	Publication of statement on regulatory implications of changing scopes of practice	Consultation on standards for businesses
Review of our Accreditation process – We will review our process of accreditation and quality-assurance of optical education, training and qualifications.	1.4, 2.3 & 4.3	Consider changes to current accreditation Handbooks			

Strategy Projects	Strategic objectives	Key activities and outputs			
		Q1	Q2	Q3	Q4
Review of our Continuing Education and Training scheme – We will review the operation of our CET scheme over the first three-year cycle and consider possible changes to the scheme for 2016-18, to ensure registrants remain fit to practise.	1.5		Review of first three-year cycle of CET scheme	Launch CET scheme for 2016-18	
Illegal practice strategy implementation –implement our strategy for dealing with the illegal practices defined in the Opticians Act 1989.	2.2, 2.3, 3.2 & 5.1	Develop code of practice and information for the public			Implement code of practice and information for the public
Business regulation – We will consider the issues we will need to address in implementing a new system of business regulation.	5.1	<i>On hold until the impact of legislative change is clear. Ongoing engagement with the Department of Health regarding the implementation of a new system of business regulation.</i>			
Student regulation – We will continue our review of the regulation of students, in order to deliver a more targeted and proportionate system of regulation.	5.1	<i>On hold until the impact of legislative change and developments within the educational sector are clear</i>			

Fitness to Practise Directorate

The Director of Fitness to Practise is Lisa Davis. The directorate has responsibility for four functions: Fitness to Practise (FTP), Hearings, Legal Compliance and management of the Optical Consumer Complaints Service contract. The work programmes and projects to be undertaken during 2015/16 are:

Fitness to Practise - Work programmes	Strategic objectives	Key activities and outputs			
Fitness to Practise		Q1	Q2	Q3	Q4
Complaints – Dealing with complaints about the fitness to practise of our registrants.	3.1	Annual audits of FTP investigation process, initial stages and IC/CE	Review annual audits of FTP investigation process, initial stages and IC/CE	Implement end-to-end case working and changes arising from audits	
		Development of end to end case working resource plan			
		Review health assessments provider contract	Ongoing complaint handling		
		Policy and guidance – Developing and embedding policies and guidance.	3.1		
Procurement and appointments - Managing contracts and appointments in line with good practice, our values and our legislative framework.	3.1, 7.2, 7.4	Recruitment of additional case examiners and performance assessors	Induction of additional case examiners and performance assessors		
		Commence open tender in respect of legal services	Implement new legal services contract		
Case examiners and Investigation Committee - Managing case examiner workload (inc quality assurance) and Investigation Committee meetings.	3.1 & 7.2	IC meetings as required			
			Case examiner training	Investigation committee training	

Fitness to Practise - Work programmes	Strategic objectives	Key activities and outputs			
Hearings		Q1	Q2	Q3	Q4
Fitness to Practise, restoration, interim order and registration appeals hearings – Managing Panel hearings.	3.1 & 4.3	35 hearing days	35 hearing days	35 hearing days	35 hearing days
		Hearings listings policy			
Non-executive support - Managing panel member training.	7.2	Panel Chair and member induction		Annual Panel member training	
OCCS		Q1	Q2	Q3	Q4
Optical Consumer Complaints Service - Management of the contract for the provision of a consumer complaints service.	3.5	Implementation of “Working Together” policy	Annual report to Council		
		Ongoing management			
Legal Compliance		Q1	Q2	Q3	Q4
Legal advice - Providing internal legal advice.	7.2	Ongoing provision of internal legal advice			
Complaints – Managing the process for dealing with complaints about illegal practice in line with our prosecution protocol, in order to reduce the risks to the public and maintain confidence in the regulatory system.	2.2 & 3.3	Ongoing complaint management			

Resources Directorate

The Director of Resources is Josephine Lloyd. The directorate has responsibility for all the support services for the organisation. The five functions are: Registration, Facilities, Human Resources, Finance and Information Technology. The directorate is responsible for ensuring the effective running of key systems and services and that staff are effectively supported. It also provides strategic advice on finance, investment in key projects and the future development of facilities and service support. The work programmes and projects to be undertaken during 2015/16 are:

Resources - Work programmes	Strategic objectives	Key activities and outputs			
		Q1	Q2	Q3	Q4
Registration					
Public register - Ensuring our public register remains accurate, up to date and accessible.	2.1	Routinely update the register and respond to requests for information from registrants, patients, employers and the public.			
Applications – Managing and developing the process of applying for registration.	4.2	Student retention cycle			Fully qualified retention cycle
Non-UK applicants – Managing the assessment of applicants with qualifications gained outside the UK.	2.1, 2.3 & 5.1	Ongoing assessment of applications.			
Facilities					
Building and utilities maintenance - Providing secure physical facilities and administration services and ensuring all utilities and other services operate effectively.	7.2	Secure facilities that are used to best advantage and enable us to carry out our functions			
		Well procured services that offer value for money and deliver the required level of service to support the business			
Meetings management - Management of GOC meeting space.	7.2	Ongoing management of meetings, provision of catering and organisation of non-executive travel and accommodation.			
CSR - Define our approach to corporate social responsibility and sustainability.	7.3	Ongoing work with staff to progress ideas and initiatives			

Resources - Work programmes	Strategic objectives	Key activities and outputs			
Human Resources		Q1	Q2	Q3	Q4
Recruitment – Managing processes for recruitment of employees.	7.4	Administrative support and assistance provided to managers undertaking recruitment activities including assessment and selection			
Management support - Supporting managers in the application of HR policies both new and existing.	7.2	Development, support and assistance to managers in applying key policies			
Performance and reward - Implementing a new performance management system.	7.2 & 7.4	New performance appraisal framework implemented			
		Annual employee appraisals using new framework			
Training and development – Development and delivery of an organisational training and development program.	7.2	Regular program of briefings on current or revised HR policies			
		Rolling training and development program for managers and staff			
Finance		Q1	Q2	Q3	Q4
Payment systems - Accounting for the income and expenditure of the organisation, managing payments and payroll. Continuous improvement and development of systems	7.1	Streamlining payroll systems			
		Ongoing month-end reporting, payments and payroll			
Budget and accounts - Preparing the annual budget and financial accounts	2.4 & 7.1	Quarterly forecast			
			Annual financial accounts	Draft annual budget	Annual budget
Financial management - Developing our financial management skills and oversight.	7.1		Enhanced Sage related reporting		

Resources - Work programmes	Strategic objectives	Key activities and outputs			
Finance continued		Q1	Q2	Q3	Q4
Financial reporting - Informing and advising on financial position and strategy.	7.1	Ongoing monthly management accounts			
Risk management - Advising on our approach to risk management.	7.3	Ongoing monthly corporate risk register and analysis			
Information Technology		Q1	Q2	Q3	Q4
ICT - Providing robust ICT facilities.	4.2, 7.2 & 7.3		Delivery of new systems for document management and expenses	Development of 'MyGOC' to be made more accessible for tablets and smart phones	Scoping of work for development of the intranet
		Ongoing user support on systems and network			
IT strategy - Define new strategy for IT, in order to ensure that a longer term plan is in place.	7.3			Draft strategy for review and adoption	Strategy implementation
IT security - Providing and enforcing effective security for GOC IT systems.	7.3		Review of IT Audit and implement recommendations where possible		
Disaster Recovery and Business Continuity - Test Disaster Recovery (DR) processes and update Business Continuity plan (BC).	7.2			Review supplier for Disaster Recovery site provider	Review online backup system
		Business Continuity Plan review and update	Business Continuity Plan test and update		
Information Governance – Managing compliance with our duties in respect of data protection, freedom of information and records management.	2.4	Ongoing work to respond to FOI and DPA requests and publish data			

Resources Projects	Strategic objectives	Key activities and outputs			
		Q1	Q2	Q3	Q4
Customer relationship management (CRM) system – we aim to realise the benefits of our CRM system and further develop our IT infrastructure.	2.1, 4.1, 4.2, 7.1, 7.2, 7.3, 7.5		Sage integration	Design of Equality & Diversity process	Build entity in CRM, develop web form on MyGOC for retention, build sync method Phase 2 Go Live
Property relocation – we aim to move to a more modern, fit-for-purpose building.	7.3 & 7.4	Office fit out; communications set up; plan staff move; plan handover of 41 Harley St; complete surrender of lease	Physical move; clear 41 Harley St and handover; snagging in new premises	Resolve snagging issues	
People strategy – Implementation of strategy which reviews training and development, performance management and key HR policies	7.2 & 7.4	Performance related pay progression (Reward project)		Improving engagement through communications and consultation; revision of key HR policies to support employees and functions	
Review of the Register – we will review the way in which information is presented on our register in order to meet our statutory remit and stakeholder expectations.	2.1 & 4.2			Consultation on lifetime registration number	Lifetime registration number
Review of the processes for assessing registration applications from inside and outside Europe - we will implement the process for assessing registration applications from outside Europe and review the process for assessing registration applications from within Europe.	2.3 & 5.1	Implement the process for assessing registration applications from outside Europe			
		Review the process for assessing registration applications from within Europe			

Chief Executive and Registrar	Strategic objectives	Key activities and outputs			
Work programmes		Q1	Q2	Q3	Q4
Internal decision making - Managing SMT and management meetings.	7.3	6 x Senior Management Team meetings			
		3 x Policy steering group meetings			
		3 x Project Board meetings			
		3 x Management Forum meetings			
Complaints – Investigation of corporate complaints.	3.4	Ongoing complaint handling			

Chief Executive and Registrar	Strategic objectives	Key activities and outputs			
Projects		Q1	Q2	Q3	Q4
Quality Assurance Framework – We will develop an organisation wide quality assurance framework.	1.4 & 2.3	Project scoping and process mapping			